

# Use of Federal Surveys for State Policy Analysis

---

National Conference of Health Statistics

August 16, 2010

Washington, DC

**Lynn A. Blewett, PhD**

State Health Access Data Assistance Center (SHADAC)

University of Minnesota, School of Public Health

*Funded by a grant from the Robert Wood Johnson Foundation*

# Overview of Presentation

---

---

# STATE DATA NEED

# State need for data (1)

---

- Implementation of access provisions in health reform
  - Medicaid expansion
  - State insurance exchange and regulation
  - Possible public plan implementation at the state level
  - Implementation of insurance regulations including young adult dependent coverage
- CHIP reporting requirements
  - Annual state reports to CMS on progress in reducing number of uninsured children

# State need for data (2)

---

- Effectively target outreach, enrollment, and safety net strategies
  - Insurance status
  - Age
  - Geographic location
  - Income
  - Race/ethnicity
- Budget and forecasting activities
  - Inputs to forecasting models based on expansion or contraction activities
  - Distribution formulas for state funds to localities

# State data requirements

---

- (1) **State representative** sample;
- (2) **Large enough sample** and a sample frame that provides for reliable estimates for subpopulations including; low-income children, race/ethnic groups and geographic areas such as county or region;
- (3) **Timely release of data** including tabulated estimates of health insurance coverage released within one year of data collection; and
- (4) **Access to micro-data** through readily available public-use files with state identifiers to allow states do conduct their own analysis and policy simulations.

# A few points on state surveys

---

- Most are RDD telephone surveys but lead states are moving to Dual Frame with cell-phone samples
  - *24.5% of HH were cell-phone only ('09)*
  - *Cell phone-only households are significantly more likely to lack health insurance compared to HH with landline telephone service*
- Most states account for coverage error due for HH without phone service through a weighting adjustment
  - *Similar adjustments for cell-phone HH have yielded mixed results*
- Concern about declining response rates on RDD surveys
- State surveys have 24% fewer uninsured than CPS

---

# **COMPARISONS OF KEY FEDERAL SURVEYS AND STATE SURVEYS**



# Methods – Federal Surveys

---

- 2008 ACS and 2009 CPS data come from publically available micro-data files provided by the Census Bureau
- 2008 NHIS data come from published tabular data
- Uninsurance is defined in all surveys as lacking any public or private coverage in CY 2008
- The ACS and NHIS use a point-in-time measure and the CPS uses an all-year measure
- Standard errors in ACS and CPS were created using the replicate weight methodology suggested by Census.

# Sample Size for children and adults

	All Ages			Children (0-18)		
	ACS	CPS-ASEC (Ratio w/ ACS)	State Survey (Ratio w/ ACS)	ACS	CPS-ASEC (Ratio w/ ACS)	State Survey (Ratio w/ ACS)
CA (07) <sup>†</sup>	339,381	19,836 (17)	64,599 (5)	88,675	6,113 (15)	
CO (08-09) <sup>†</sup>	47,803	4,402 (11)	10,090 (5)	12,071	1,387 (9)	1,858 (6)
NJ	85,393	4,629 (18)	7,336 (12)	213,27	1,441 (15)	1,607 (13)
MA (08) <sup>†</sup>	63,688	3,173 (20)	12,235 (5)	15,066	980 (15)	
MN (09) <sup>†</sup>	52,144	4,666 (11)	12,031 (4)	13,194	1,475 (9)	1,957 (7)
OH <sup>†</sup>	114,426	5,417 (21)	50,944 (2)	28,134	1,668 (17)	13,443 (2)
OK (08)	36,704	2,974 (12)	5,729 (6)	8,904	784 (11)	730 (12)
PA (08)	122,337	6,151 (20)	49,345 (2)	28,230	1,822 (15)	11,098 (3)
VT	5,924	2,717 (2)	9,237 (1)	1,305	791 (2)	1,992 (1)
WI (07) <sup>†</sup>	57,157	3,913 (15)	6,857 (8)	13,966	1,245 (11)	

Source: CPS-ASEC and ACS data are from public use data. State survey data are from published reports and personal communication.

†: Sample based on dual-frame.

†: Estimate for Age 0-17

# ACS vs CPS State Perspective

---

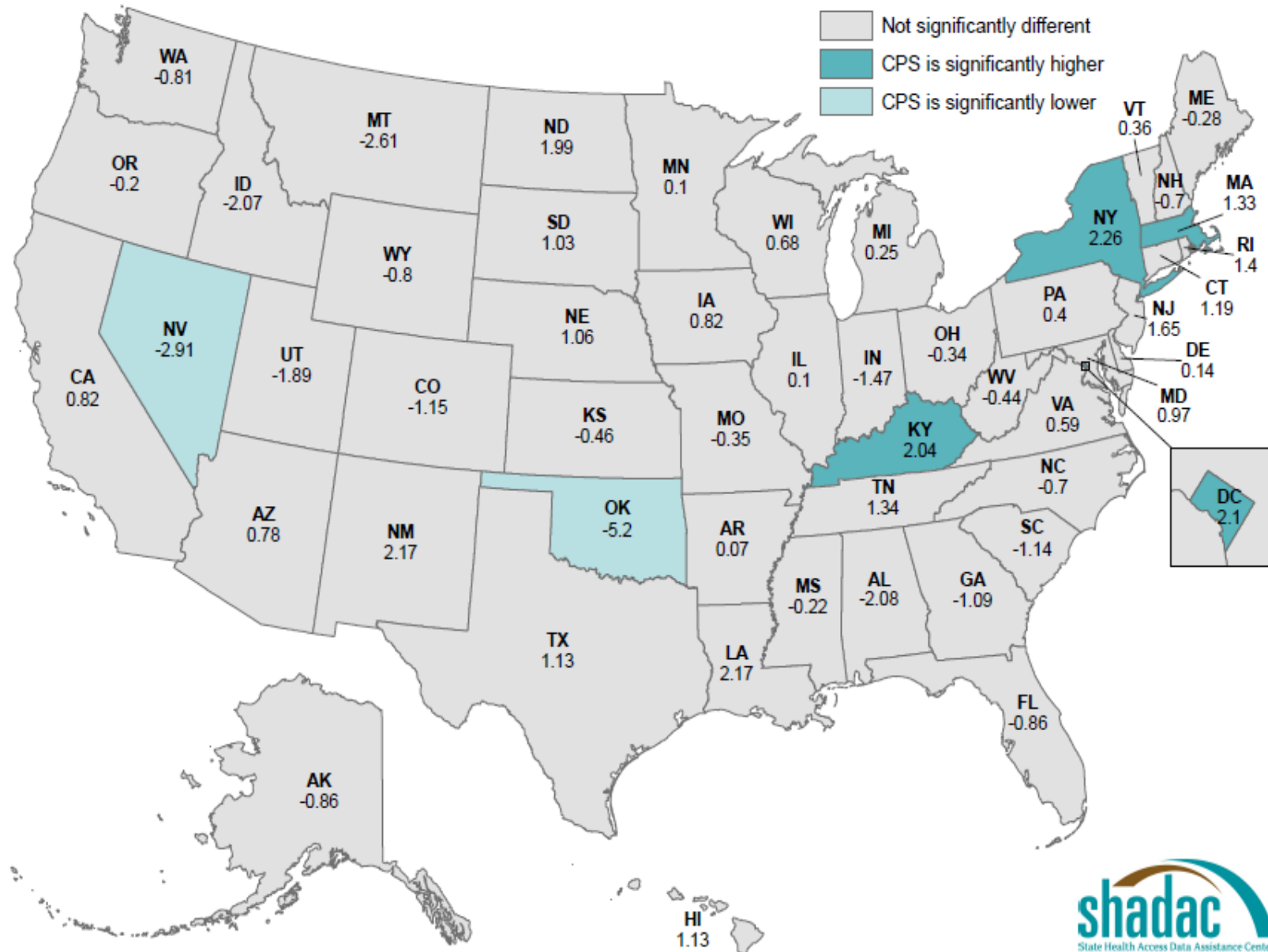
## ***Positive:***

- Large sample size, geographic coverage, annual estimates, public-use files
- Imputation done in each state independently
- Point-in-time coverage questions
- Ask coverage about each person in HH

## ***Negative:***

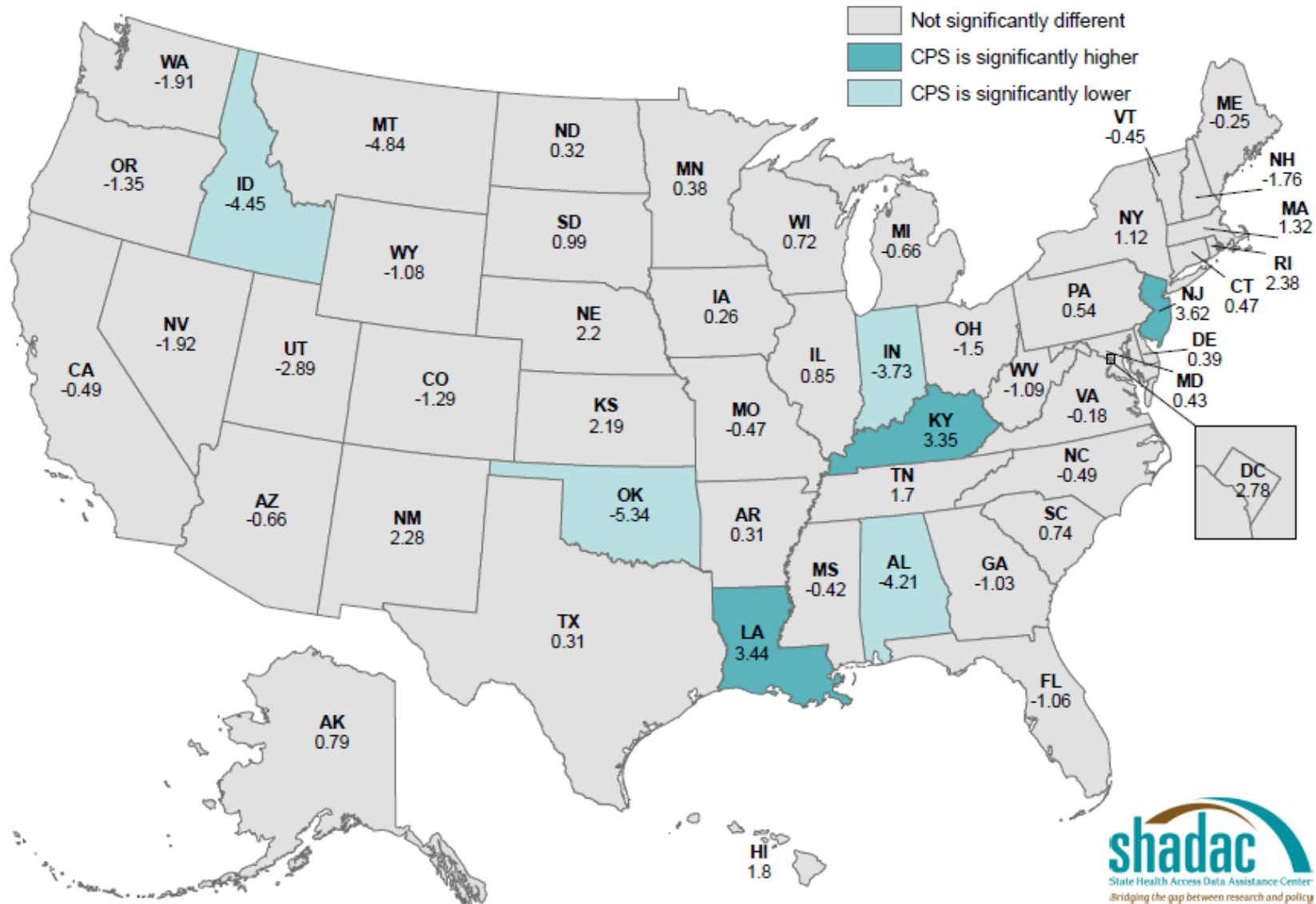
- Lack of state add-in names
- Different estimates and unfamiliar from the CPS and state surveys
- No additional health status or access questions

# Percentage Point Difference Between CPS and ACS Uninsurance Rate: All ages



Source: 2009 Current Population Survey; 2008 American Community Survey.

# Percentage Point Difference Between CPS and ACS Uninsurance Rate: Children (0-18)

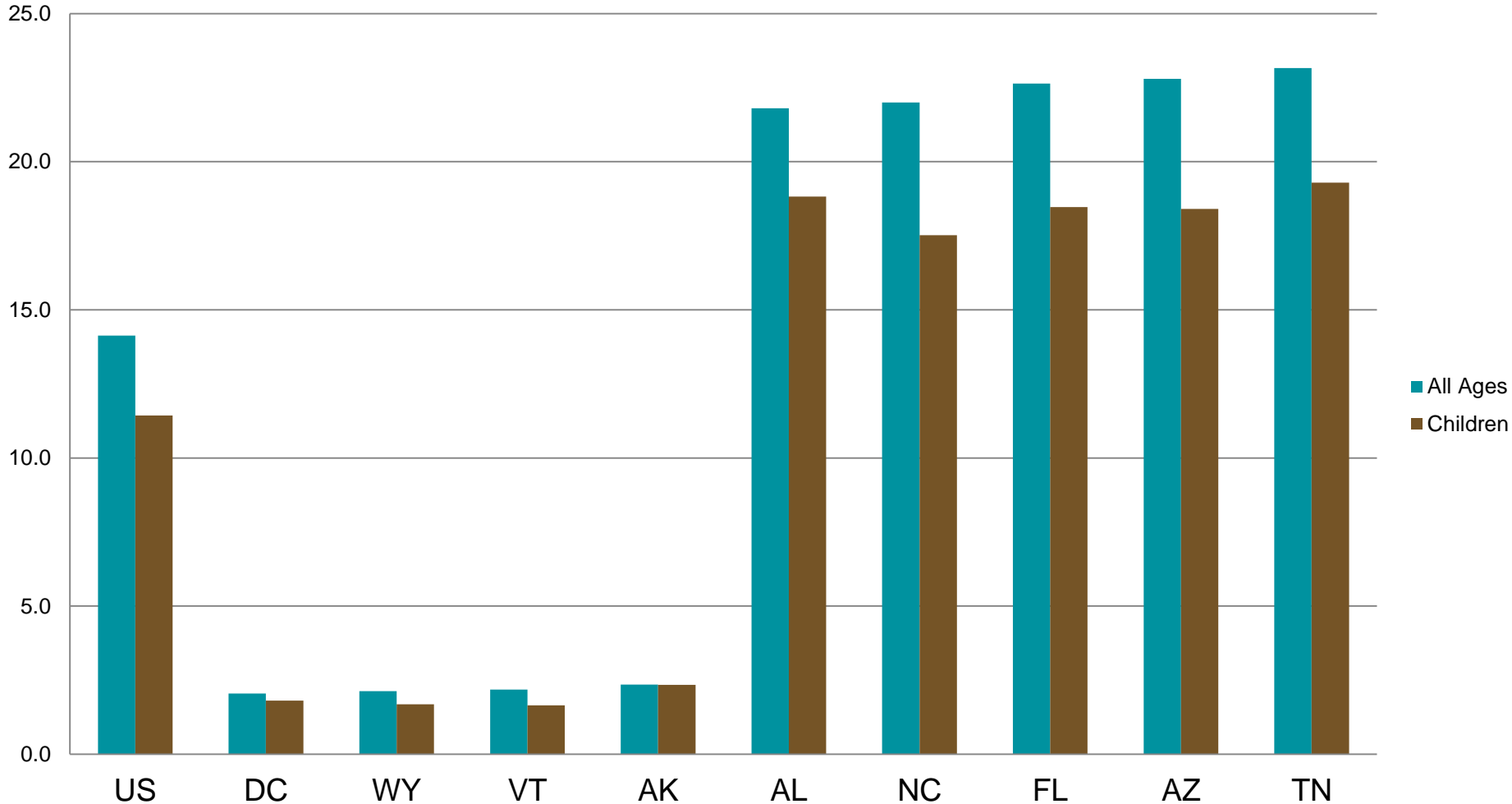


Source: 2009 Current Population Survey; 2008 American Community Survey.



# Comparison of ACS to CPS Sample Size, by Age (5 Smallest and 5 Largest State ACS Sample)

RATIO  
ACS/CPS



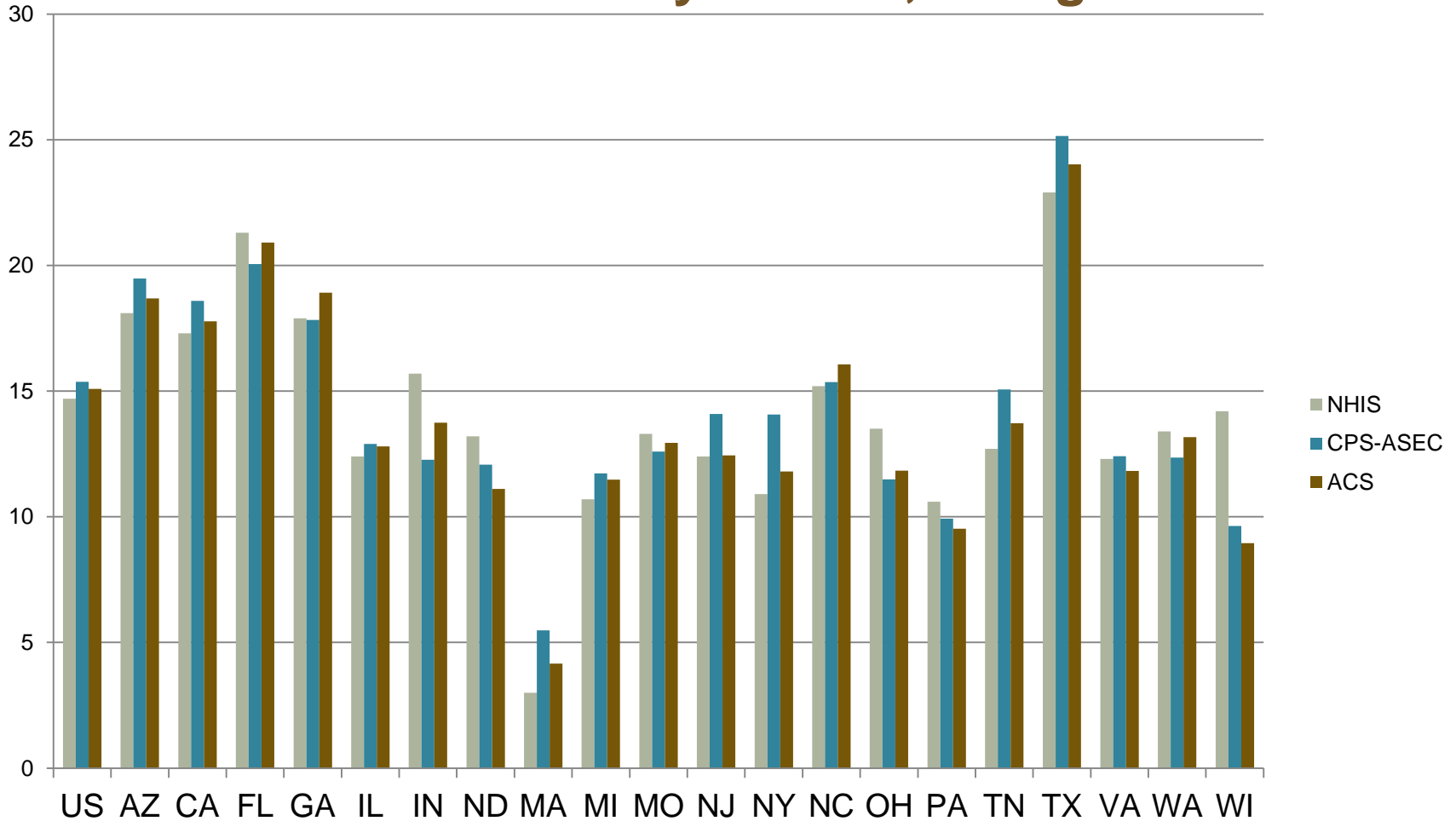
Source: 2009 CPS-ASEC and 2008 ACS data are from public use data. State survey data are from published reports and personal communication.

# National Health Interview Survey – State Perspective

---

- The NHIS publishes health insurance coverage estimates for 20 selected states each year
  - *AZ, CA, FL, GA, IL, IN, MD, MA, MI, MO, NJ, NY, NC, OH, PA, TN, TX, VA, WA, WI.*
- Smallest geographic identifier available on public use micro-data is the census region
  - Limits state-level or subpopulation analysis
- Data users wanting state-level analysis must obtain access to state identifiers in NCHS RDCs
- Rich health-related data source, good point-in-time health insurance question,
- Limited state-level use

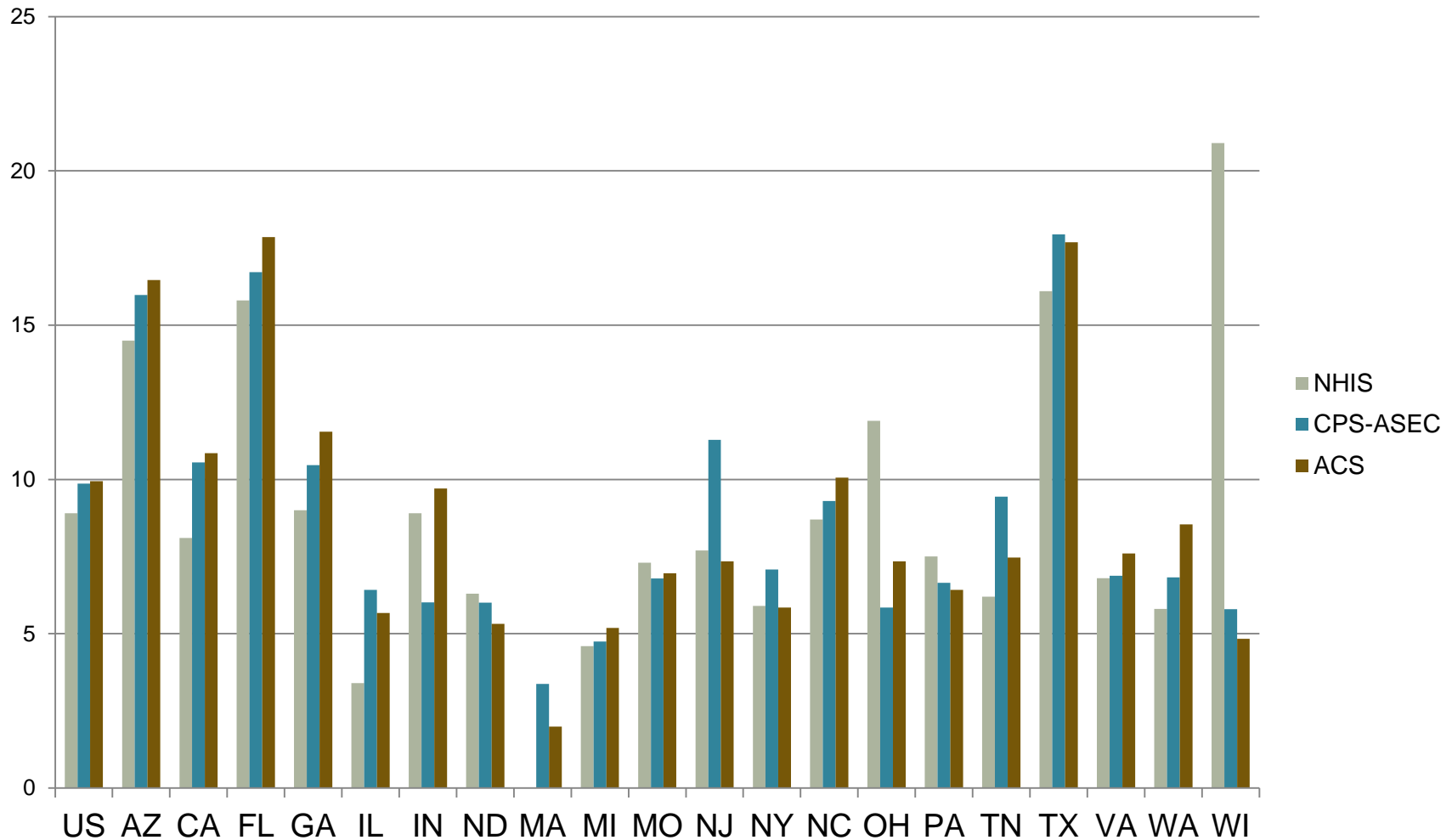
# Comparison of Estimates of Uninsurance by Federal Survey Source, All Ages



Source: 2009 CPS-ASEC and 2008 ACS data are from public use data. NHIS data collected from published reports.

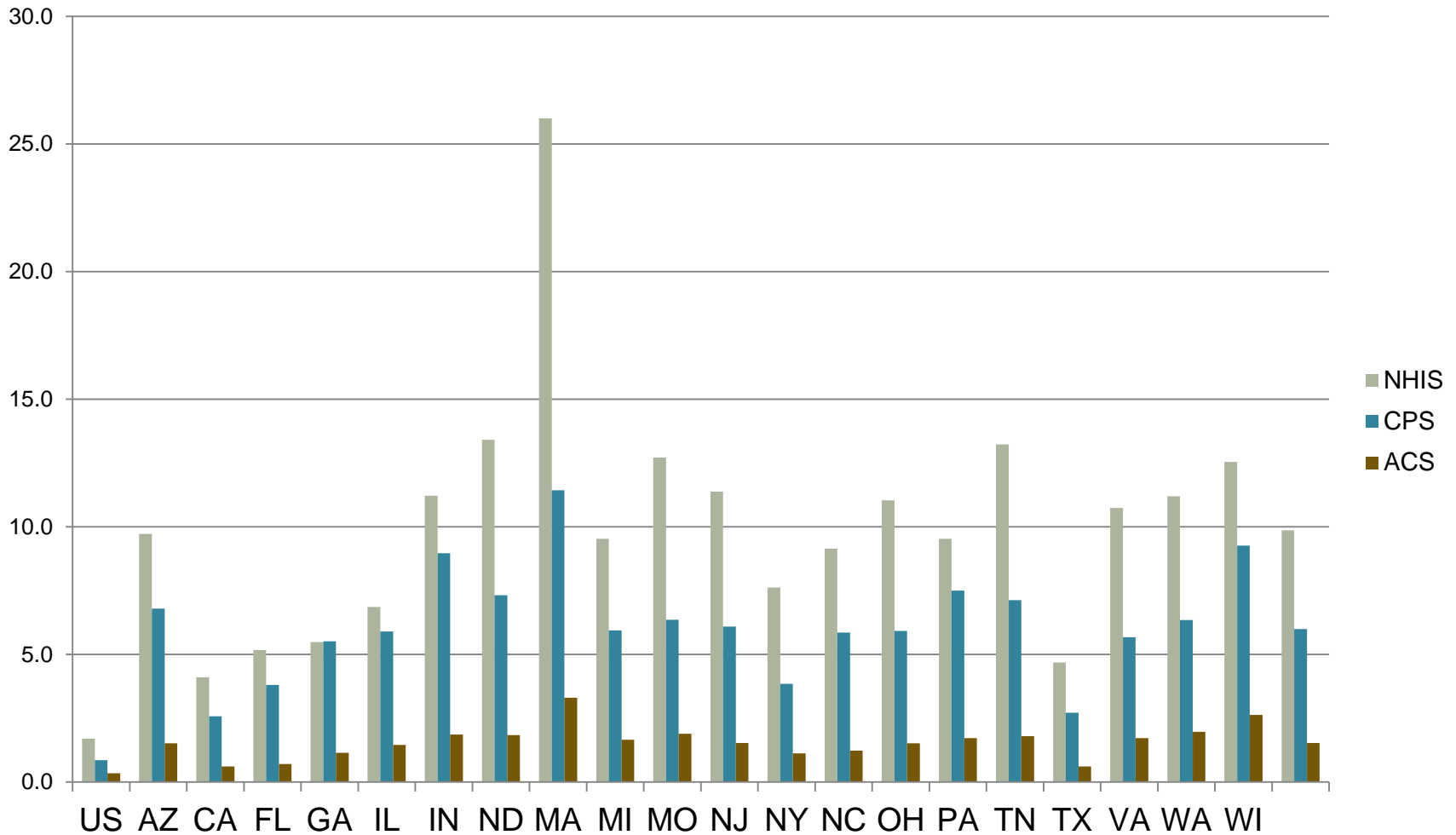


# Comparison of Estimates of Uninsurance by Federal Survey Source, Children (0-17)



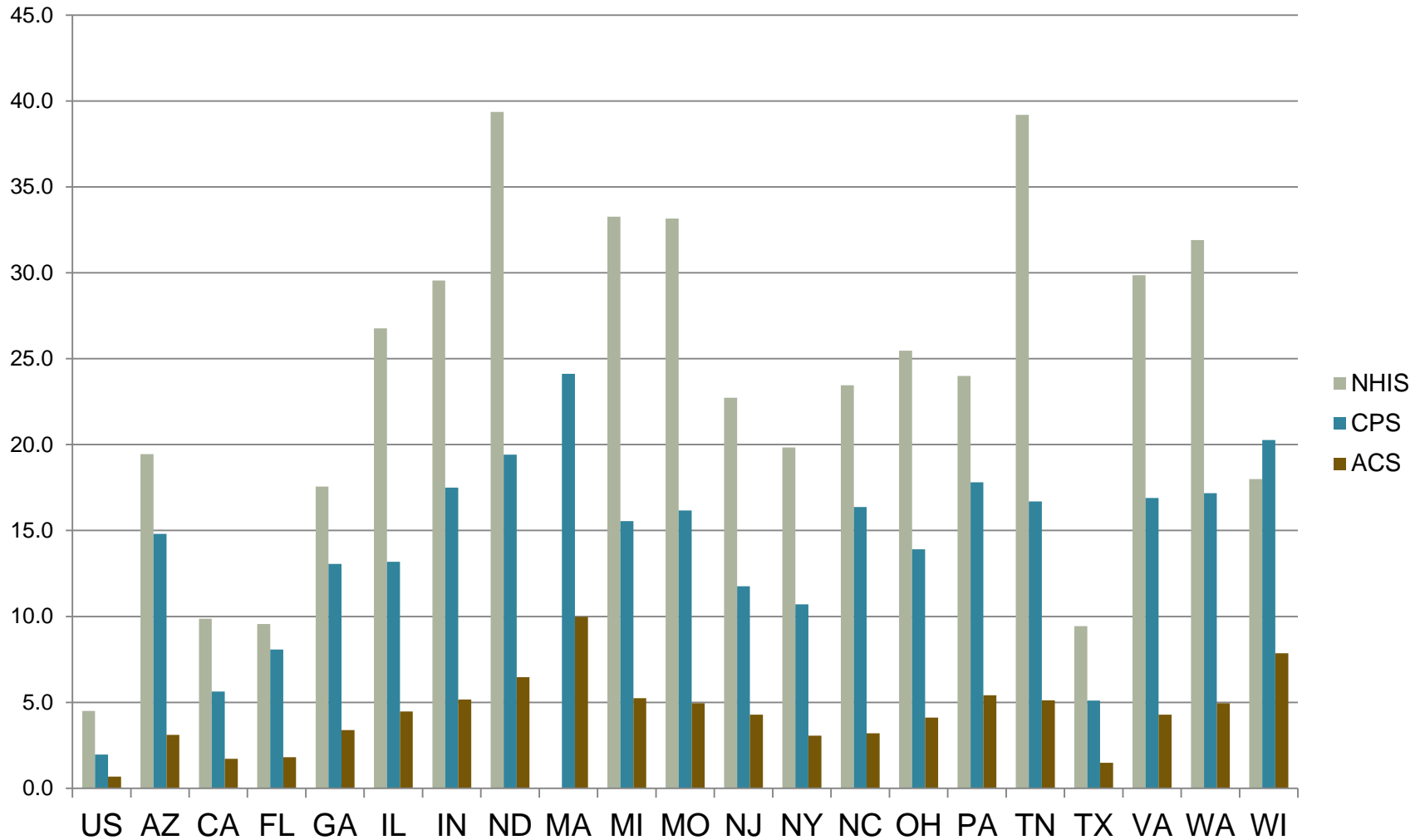
Source: 2009 CPS-ASEC and 2008 ACS data are from public use data. NHIS data is collected from published reports. Data is missing in MA for NHIS due to small sample sizes.

# Comparison of Relative Standard Errors for Estimates of Uninsurance by Federal Survey Source, All Ages



Source: 2009 CPS-ASEC and 2008 ACS data are from public use data. NHIS data is collected from published reports. Relative standard errors defined as the SE divided by its mean.

# Comparison of Relative Standard Errors for Uninsurance Estimates by Federal Survey Source, Children (0-17)



Source: CPS-ASEC and ACS data are from public use data. NHIS data collected from published reports. Relative standard errors defined as the SE divided by its mean.

---

# CONCLUDING COMMENTS

# What is the future of State Surveys

---

- One third of states will continue to fund their own surveys and have survived with state budget constraints
  - Financing includes state general fund, CHIP evaluation federal administrative match, conversion and other foundations
  - ACS will be one more point of information but policy decisions will rest with state survey data
  - States used to data informing policy decisions like their own state-specific data.
  - Ability to add questions quickly that might be useful for state and national policy questions

# Two Potential Options....

---

1. Fully fund a state-representative health survey that is designed to measure health coverage and access
  - NHIS (*and MEPS-HH for cost and utilization*)
2. Build a state-level data collection infrastructure to inform national monitoring of health insurance coverage
  - Could be a sub state of leading state surveys
  - Early indicators of reform success and challenges

# Contact information

---

**Lynn A. Blewett, PhD**

State Health Access Data Assistance Center

University of Minnesota, Minneapolis, MN

[www.shadac.org](http://www.shadac.org)

[blewe001@umn.edu](mailto:blewe001@umn.edu)

612-624-4802



UNIVERSITY OF MINNESOTA